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ON DISEASES OF THE JOINTS.

(Continued from page 8.)

MR. LISTON said he had neglected, in his former lecture, to state, that one of the most important signs of disease of a joint, large or small, was the great extent of unnatural motion which existed in it. This was readily accounted for by the state of the lateral and other ligaments, which were softened, relaxed and disorganized. The wasted condition of the muscles of a disused limb might also be noticed as a cause of this unnatural mobility. It was important, besides, to observe the sponginess and lightness of the neighboring bones, which, indeed, were so thin in their shells and so soft, atrophied as the phrase was, that they could be readily cut with a strong knife. They were, besides, often diminished in bulk and length by interstitial absorption. This occurred either with or without deposits of tubercular matter in the cancelli. There was little chance of a natural cure when the joint was thus diseased. Sometimes, though rarely, a cure was effected by the unsound surface being thrown off and anchylosis taking place. In many cases it was absolutely necessary to amputate the limb, while in other instances, as they had lately seen, it was sufficient to remove the diseased portion only. This operation could be more frequently resorted to with advantage in the upper than the lower extremities. Unless the affected limb could be preserved of nearly equal length and strength as the other, progression must be performed awkwardly and inefficiently. Whereas under many circumstances, if the motions of the wrist and fingers only of one side could be preserved, though the shoulder and elbow-joints were immoveably fixed, if in a favorable position, the organ, being independent of the other, might be applied to many useful purposes. The difference in length and strength in the two limbs was of much less consequence.

DISEASES OF PARTICULAR ARTICULATIONS.

Diseases of the Articulations of the Fingers might be the result of injury to the joint, or follow disease of the soft or hard parts; or it might be the effect of a sprain, or a trifling bruise and laceration over the convexity of a joint. It more frequently, however, followed an attack of inflammation and abscess of the soft parts, as in whitlow. Whitlow, or paronychia, might come on spontaneously, or follow injuries, as a bruise, punctured wound, or bite, &c. He had seen, very

lately, an instance in which extensive disease of two of the articulations of the finger came on as a consequence of a bite from a man. A fellow had got troublesome in his cups, and set to tearing the waiter's shoulder with his teeth; a person interfered to eject the troublesome customer, and was attacked in a similar manner. The landlord tried to "choke off" the original assailant, and had, in return, the forefinger of his right hand well chewed. The part became violently inflamed; abscesses formed: these were opened. The phalanges of the joints, however, became affected, were loosened, and grated distinctly: amputation was hinted at. The patient was advised to apply to some old quack or other, in petticoats, who promised a perfect recovery. The greater part of the middle phalanx, with the flexor tendons, however, came out and caused so much alarm that amputation was at length submitted to. Mr. Liston had seen many such cases, both in public and private practice. Whitlow was always attended with much pain from the unyielding nature of the affected tissues, and effusion, which generally relieved inflammatory action existing in other situations, only produced an aggravation of the symptoms and the danger in this. If the bone in cases of whitlow become first affected, the disease soon runs its course, and in five or six days, perhaps, you might find extensive necrosis. Disease of this kind could not go on long without implicating the joint. Neglected diseases of the fingers often led to extensive abscess of the hand and wrist. These bad consequences of inflammation, abscess, death of the tendon and bone, disease of joints and implication of neighboring parts, were only to be averted by early and active antiphlogistic means, by which was not meant saline medicine and cold lotions, but free leeching, fomentations, and, if need be, early and free incisions. The dreadful suffering and fever would then be relieved, and the tissues preserved in, or restored to, their normal condition. The smaller joints were subject to the same changes as occurred in the larger ones; the synovial membranes become thickened and vascular; the cartilage was absorbed, as seen on the recent and injected specimens; the bone became affected, the joint swelled, and the ends of the bones grated sensibly upon each other. Under these circumstances it was very rarely possible to produce a natural cure, and when this was effected the anchylosed joint was rather in the way than otherwise. In what position, to render the organ serviceable, could the joints be put and fixed permanently, bent or straight? In neither could it be of any use, but the reverse. Amputation, under all the circumstances, was very often the most advisable proceeding. When the finger was diseased at the metacarpal articulation, then the member should be removed with a portion of the metacarpal bone. When the phalanges and tendons were irretrievably implicated in disease, then the removal was effected advantageously at the metacarpo-phalangeal joint. In disease of the middle and proximal bones the removal might be by disarticulation, or by division of the bones in their middle, according to circumstances. These operations he would demonstrate shortly. In cases where the thumb was diseased, a natural cure was much more desirable; a stiff thumb was better than none, and would always act as

a resisting point to the fingers. A cure was effected in the case from which a sketch exhibited had been taken, a very severe and aggravated one, as well as in many others, by putting the member up in splints for a considerable period. In cases where the last phalanx of the thumb or finger was affected, the portion of the diseased bone might often be removed, and a cure effected without deformity; but this could not occur when any other of the bones or articulations were involved. Amputation was then the only remedy. The pupils must have seen the great anxiety evinced in a variety of cases to save as much as possible of this useful organ when implicated by disease, or suffering from the effects of injury, and must be convinced that the mutilation was inevitable when recommended and resorted to. It had been proposed to take out the whole or portions of the metacarpal bones when involved in disease, without removing the thumb or finger, which they had supported. The attempt had been made, and he had witnessed it in one case. The remnant of the thumb was powerless and always in the way. Much better that it had at once been amputated.

Disease of the Wrist Joint.—Here the disease existed between the rows of the metacarpal bones, or in the articulation between them and the bones of the foream. In a case operated on the other day, there was ulceration of the cartilage, betwixt the radius and ulna, and the disease had spread also to the articulating surfaces of the scaphoid and lunar bones with the radius; one of these bones was, in point of fact, in a state of necrosis, and nearly detached. When disease had once seized on the wrist, great mischief was likely to ensue; so many articulating surfaces, membranes and ligaments came together in this neighborhood. They had now opportunities of seeing many cases of this disease in its various stages. The signs of disease in this were similar to those observed in other articulations, swelling, unnatural looseness of the joint, and, in some instances, discharge from sinuses. The introduction of a probe into the diseased articulation, would at once, in most cases, afford a sensible sign, while in others, from the winding course the sinuses took, it was impossible to introduce the instrument with a satisfactory result. In the earlier stages of disease, by perfectly steadying the joint, by means of a splint, and the use of counter-irritants, particularly repeated blisters, raised by the nitrate of silver, a cure might be brought about. In some instances the opening might be enlarged, and the bone, when only one was affected, extracted. He had met with some cases of this kind, in one of which the os magnum was removed, and the cure was complete and permanent. Generally, however, as other bones were implicated, this proceeding could not be adopted, and in aggravated cases, with profuse discharge and hectic, amputation was called for. Resection of this joint could not easily be performed; there would be great risk of wounding important parts, and the disease would be apt to recur. Even if it did not, the hand could not be serviceable. In the case of this disease presented the other day, amputation offered the only chance of success, the patient being much exhausted by the violence and long continuance of the disease.

Disease of the Elbow-joint might come on spontaneously, or, in

some constitutions, follow slight injury to the part, or a more severe one in others. In some rare cases it had resulted from compound fracture of the olecranon process. Here was a specimen of disease from this cause. In this case the patient slipped, as she was getting out of bed, or fell out of it, and the elbow struck against the chamber-utensil, which broke, producing a wound extending into the joint. The articulation was kept quiet, and every means for the prevention and reduction of inflammation employed, but one abscess formed after another, and the disease spread to such an extent, that it became necessary to remove the limb; nothing less than this would have been successful, as the humerus, as they would see, had become necrosed. Very generally the disease was attributed to sprain, or it might follow upon rheumatic inflammation, thickening of the synovial capsule, and consecutive ulceration of cartilage and bone, supervening upon affections of the fibrous investments of the joint, as, in fact, happened in the patient whose elbow-joint was cut out the other day. When the elbow-joint was diseased, the same symptoms and signs were observable as when other articulations were affected. At first, as might be seen in several cases under treatment (one of these patients had almost lost one of his lower extremities, on account of extensive necrosis of the tibia, with diseased epiphysis and knee-joint), the disease might be checked by appropriate treatment, and often without much impairment of the functions of the joint. In many cases, however, the disease of the elbow was in such an advanced state, when presented to the surgeon, particularly in hospital practice, that it was necessary at once to remove the limb.

In the case of a little girl, lately in the hospital, who had for a long time labored under disease of this joint, he had at one time proposed to remove the ends of the bones. Her admission into the hospital was retarded by an attack of smallpox. When she did come under his care the mischief was so extensive, and her general health so much impaired, that he considered amputation, under all the circumstances, as the most desirable and only safe proceeding. Had he attempted resection here, he might, after all, have been obliged to remove the limb under most unfavorable circumstances, and with an almost perfect certainty of losing his patient; this Mr. Syme did, in a case in which he (Mr. L.) had dissuaded the parents from having excision performed; this was, however, done, amputation followed, and death soon closed the proceedings. In many instances, however, where the health was good, and the disease was confined to the joints, Mr. Park's operation could be performed with benefit. This operation had been now resorted to in a vast number of cases; he (Mr. L.) had performed it seven times. The operation proposed by Park, as already remarked, was performed several times by Moreau, father and son; it fell into disuse until revived by Mr. Crampton, of Dublin, in 1823. It has since been frequently employed by Roux and Syme; once by Mr. Spence and Dr. Simpson, of Edinburgh. Strange to say, it had been performed by any other than himself, once only in London, so far as he could learn, and that by Mr. Key; the case was detailed in "Guy's Hospital Reports," and had given occasion for a very excellent paper on the subject by Mr. Black-

burn. The operation had already been twice resorted to in that (University College) hospital. The limb was not always so strong as before, but, in some instances, a good serviceable joint was formed from ligamentous anchylosis having taken place. In young subjects, however, in addition to ligamentous anchylosis, there was often an osseous deposit at the extremities of the bones, and an attempt, in some cases, to supply the want of the heads of the bones; these became covered by a sort of capsular ligament, and a pretty good joint was formed. This was a different process from that which was observed after division of the shaft of a bone if the cut end is well protected. Mr. Crampton, in an excellent paper on this subject, in the "Dublin Hospital Reports," had remarked that the "injury is repaired in one case by parts whose determinate function it is to form and repair only the shaft; if in the extremity, by parts whose determinate function it is to form and repair only the extremity." The operation of resection of the elbow was neither difficult nor dangerous, and if undertaken under proper and favorable circumstances, should almost always be successful. The patients on whom he had operated had all recovered, with tolerably serviceable limbs, with the exception, he believed, of one left by him in the Edinburgh Hospital, when he came to take charge of the surgical department of the North London; that case, he had been informed, did not go on favorably, and he was not certain that the limb had not been ultimately removed. This said nothing against the operation; the patient, a young woman, was in a most favorable state for its performance, and was doing well, when he left, many weeks after; the charge devolved upon a person, now no more, who was certainly a *professor* of surgery, but one who had been preferred, and put over his (Mr. L.'s) head, more on account of his adherence to, and proficiency in, politics, than in his profession. How the treatment had been subsequently conducted he could not tell; probably an attempt was made, by passive motion, to form a new joint, a hazardous and unsurgical proceeding in such cases, after the growth is completed. The appointment alluded to, and one made on somewhat similar grounds, determined his (Mr. L.'s) removal to London; at all events made him less unwilling to hearken to offers made him to join that school.

Dr. Jeffrey, of Glasgow, who was rather a theoretical than a practical surgeon, had recommended that an incision should be made on each side of the articulation, in order to divide the lateral ligaments, and to avoid injuring or disturbing the parts on the posterior aspect of the joint, too much; and he further advised, that a toy-like instrument, the chain saw, should be employed instead of the common amputating one. In the operation he (Mr. L.) had performed the other day, and in every other one, the only instruments he had used were a bistoury, cutting forceps, and a common amputating saw. The joint was cut down upon, and the remains of the ligaments divided; the elbow was then brought to such an angle as to permit the heads of the bones to be readily thrust out; the parts around them were detached, the ends sawn off, and the bones replaced in a proper position.

OPHTHALMIC HOSPITAL AT CANTON.

[We continue our quotations from the interesting reports of this institution.]

Encysted Tumor.—Wangke, aged 12 years, of Shuntih. This little girl is a slave, and was sold by her mother for $8 or 10. She was accompanied to the hospital by her purchaser, a very respectable and well-bred Chinese woman, who said the child was not her offspring, yet she felt for her the affection of a mother, and though the blemish had been a sufficient excuse for returning her to the mother, she preferred not to do so; and having heard of the hospital in Canton, was at the expense of time and money to bring her, with the hope of relief. She had an encysted tumor, about 16 inches in circumference at the base, situated upon the sacrum, and to the right side. Its pressure had produced some absorption of the sacrum, and caused the os coccygis to turn outwards. It was moveable, and hard pressure gave it no pain. There was no weakness of the spinal column or of the lower extremities. After suitable preparation of the patient it was removed, and found to be attached by a peduncle of the size of a common quill, which entered one of the posterior sacral foramina. On dividing it, one of the gentlemen who assisted noticed a slight flow of milky substance from the point of attachment. A ligature was required to prevent the escape of the fluid from the tumor, which was distended with limpid contents resembling a bladder of water. The wound was dressed as usual. The child was in a sub-comatose state for some hours after the operation, and slow in answering when spoken to—perhaps from the opiate she had taken. In the evening and the next morning, her pulse ranged from 130 to 140, with considerable fever, and there was anxiety for the result. Calomel and rhubarb were given, and brought away a quantity of large worms (lumbrici), and all her unpleasant symptoms subsided. The child's appetite became good, and the wound healed up by granulations in a little more than a month. She became the picture of health, and, with cheeks plump and rosy, was discharged at the expiration of six weeks.

Hare-lip.—Lan Atang, aged 17, of Honan, was disfigured by this congenital malformation, which extended up into the left nostril, and two teeth projected out at the opening. These were removed, and when the soreness subsided, the operation was performed. The union was perfect, and the dressing removed in about one week. Both the appearance and voice were very much improved.

An operation is sometimes performed by native physicians for this deficiency. It consists of applying an escharotic between the edges of the lip, and as this sloughs out, the lips of the wound are brought together and healed up by granulations. I have seen four cases in which the operation has been performed. In one instance the upper lip was drawn so tight as to form a straight line, and with the under lip projecting, his appearance was very undesirable. Whether this was the fault of the operator or the necessity of the case, did not appear. In another man the lip was drawn askew.

March 13th. Chun Fang, son of the tsotang of Shuntih, aged 59 years, was born in Sheihle. In consequence of vice his general health had been affected. He had ulcers upon his head, not affecting the cranium. Eight months previously they had been cured, and blindness supervened. When he came he could see light, but not sufficient to walk without being led. He was encouraged to expect relief from the severe pain he experienced, and that the progress of the disease might be arrested, and possibly his sight improved. There was congestion of the bloodvessels of the eye. One dozen leeches, which in this country are very large, were applied below the eyes. Twenty grains blue pill and one ounce sulph. mag. were prescribed. The leeches afforded immediate relief, and the patient expressed his surprise that he could see to count his fingers. March 16th. The sight remained improved. The leeches had produced a very great tumefaction of the left side and glands of the neck. As he was costive, an ounce of castor oil was administered, and warm fomentations applied to the face, with an opiate at night. March 29. Pulse 126. The right side of the face also affected; the swelling of the left subsided a little. Patient vomited five times last night. Large vesicles formed upon his ears, as if produced by a blister. The almost entire absence of redness did not suggest the erysipelatous nature of the disease. (Another patient who had been operated upon for entropia, and who had been discharged, returned about the same time similarly affected, with an erysipelas of a more aggravated character than I have ever witnessed. Both of these patients scarcely retained the appearance of a human face.) He was very weak, and had great difficulty of breathing, a dry cough, pains in the chest, tongue thickly coated and parched, and his bowels constipated. A decoction of lichen islandicus, gum arabic, and liquorice, was ordered to be used freely. And a gargle of borate of soda, an ounce of salts, and an opiate, and warm pediluvium at bed-time, were prescribed. The patient was to take congee or sago if disposed. March 30th. Decidedly better; bowels had been moved, and the same treatment was continued. March 31st. Patient unable to come. Difficulty of respiration, thirst and debility increased. His extremities were cold, and face smaller—as reported by his servant, a very intelligent man. One ounce of castor oil and a drachm of the oil of turpentine were taken immediately, and gave calomel xii. grains, pulv. ipecac vi. grains, and sugar j. ounce, divided into twelve parts, one of them to be taken hourly, and 30 drops of oil of turpentine every hour, and half a grain of opium every three hours—and two grs. of sul. quin. every two hours. The head was kept wet with a lotion of nit. potas., and the patient allowed to drink freely of the decoction of lichen islandicus, as usual. April 1st. The bowels were moved the last night—the patient has a little appetite—raised considerable sputa, tongue better, and his extremities not so cold. The erysipelas better, and the same treatment continued. April 4th. Not heard from the patient for three days. His servant reported him to be better. The disease had evidently subsided. He still complained of debility and had a diarrhœa. Appetite improved. Decoction of lichen, and lotion of nit. potas. continued, together with

oxymel of scillæ. April 8th. The patient was able to be brought to the hospital, but did not get out of his sedan. A course of tonic treatment was then adopted, first sulphate of quinine, and afterwards the saturated tartrate of iron. His servant occasionally returned to say he was convalescent.

While preparing the report the patient has returned, in his official dress, with presents, &c. He enjoys good health. He said he was to set out for Pekin in two days, and wished for directions respecting his health and sight, in future.

CONTRACTION OF THE COLON.

(Communicated for the Boston Medical and Surgical Journal.)

George Smith, ætat. five years, of scrofulous temperament, was attacked on the 15th of January, 1839, with mild symptoms of pneumonia. He was treated with castor oil and other simple remedies for two days. The disease not yielding, I was called to take charge of the case.

Symptoms.—Surface warmer than natural; tongue coated with mucus of a yellowish cast, moist edges; pulse 90 to 95 per minute; respiration slightly hurried and somewhat noisy; cough frequent and dry; urine scanty and high colored. Complained of soreness of the chest while coughing, but no fixed pain. Some uneasiness on pressure in the epigastrium.

Viewing the case as one of a very mild character, I placed my reliance on calomel, antimonials and blistering, in the secondary stages, on different points of the chest. The disease progressed in the same mild manner, gradually yielding under the application of the above named remedies, and on the seventh day of its continuance formed a partial crisis. The bowels being rather confined at this time, it was thought advisable to administer a mild purgative. Castor oil was accordingly given in the morning. Not operating readily, an injection was thrown up the rectum, which produced one discharge of dark fœtid matter.

Eighth morning, increased heat of surface; pulse 100 per minute; tongue dry (having been previously nearly clean and moist), and red, particularly at the tip; great thirst and restlessness; cough occasionally; expectoration free. I gave him 15 grs. calomel, 20 grs. pul. jalap, to be repeated in two hours, and followed in one hour by liberal doses of an infusion of rhei and senna, continued hourly until a cathartic operation should be obtained. My venerable and much esteemed friend, Dr. Charles Little, was called as counsel, and concurred with me in the opinion that the pneumonic symptoms were subsiding, and that opening the bowels freely would, in all probability, relieve the present unpleasant symptoms. The above named remedies were continued through the day, with injections every two hours.

9th. Symptoms much the same as yesterday; bowels not moved. 15 grs. calomel, 15 grs. pulv. jalap, to be followed by ol. ricini once in

two hours. Injections of common salt and water every half hour. 12 o'clock, no change, except slight pains in the bowels complained of at considerable intervals. Bowels soft, not distended, and very slightly tender on heavy pressure. Has retained all the medicine and liquids, and at this time is quite free from nausea, pain, singultus, distention, and other symptoms attendant upon obstructions of an ordinary character. Pulse ranging from 100 to 110; great thirst.

On further consultation with Dr. Little, a large epispastic was laid over the bowels; a drachm of spts. of turpentine to be given every two hours; a scruple of proto-chloride of mercury, also once in two hours, and continue injections.

10th, 4 o'clock. The turpentine appearing to nauseate the stomach, it and the calomel were omitted. At this time the symptoms are all aggravated; great thirst; pulse 120 to 130 per minute; tongue dry and red, almost livid; countenance rather sunken, and expressive of suffering, but no distention or pain in the bowels. Blister had filled well. We now resorted to croton oil, giving a drop rubbed up with a little syrup, once in two hours, and continue the injections every hour. Four doses or drops of the croton oil were given him; at evening it was omitted, as he appeared to be sinking. Wine was administered freely, but unavailingly, and he expired 15 minutes before 10 o'clock in the evening.

Post-mortem Examination, twelve hours after Death.—The viscera of the chest healthy; the lungs crepitous throughout their whole extent, and entirely free from adhesions. Stomach healthy; the liver and spleen had also a perfectly healthy appearance. Small intestines appeared quite healthy. The colon, after ascending three inches, became contracted to less than one fourth its ordinary dimensions, with thickening of the outer coats. No redness or marks of inflammation, except about two inches of the colon, where the contraction commenced; the remainder of the ascending colon, transverse arch and sigmoid flexure, were contracted, so as scarcely to admit a crow-quill. There were two small circumscribed dilatations, one near the commencement of the diseased portion, the other in the sigmoid flexure, of the size of a small filbert, containing green mucus. Gall-bladder moderately distended.

ROBERT KELSEY.

Avon, Livingston Co., N. Y., Feb. 3, 1839.

CASE OF FUNGUS HÆMATODES.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Cases like the following, though rare, may not be uninteresting to some of the readers of the Journal, and especially to those who may have had an opportunity to witness the destructive progress of this hitherto incurable disease.

Harriet J. Vanarnam, a lovely and interesting little girl, aged six years, was attacked, in the month of March last, with general fever,

pain in the knee and ankle-joints, great tenderness behind the trochanter, with all the common symptoms of an incipient morbus coxarius. Counter-irritation to the hip, together with laxatives and anodynes, had the effect to dissipate this threatening train of symptoms, and in about a week the little patient appeared convalescent.

In this state she was taken into a carriage to ride a short distance, and on returning was again attacked with the same train of symtoms as at first, somewhat aggravated, but all referred to the other leg. The previous course of treatment again produced relief from her suffering, which at times was very great, especially in the keee and ankle joints. She continued in a comparatively comfortable state for about two weeks, with occasional vagrant pains shooting through her limbs, head and joints, when a colorless, slightly elastic tumor began to appear on the side of the lower jaw, midway between the angle and symphysis, attended with no tenderness or pain. Various discutient applications were applied, with no effect. The tumefaction progressively increased. Internally the gums began to swell, the teeth to loosen, and in a few days the latter were easily removed from their sockets. Shortly a fungus was seen sprouting from the sockets, which evidently disclosed the malignant nature of the disease. It grew rapidly, and eventually filled almost the entire cavity of the mouth, pushing the jaws asunder as far as the muscles would permit, discharging a great quantity of thin sanies, accompanied with a most intolerable fetor.

The external tumor increased to an enormous magnitude, quite elastic, and traversed in all directions with numerous large blue veins, drawing her once beautiful features into a most terrific form, and at once presenting the most revolting and heart-rending case of human suffering I ever witnessed. Deglutition at length became very difficult, and at last death put a period to her sufferings, ten weeks from the appearance of the tumor.

I would remark that the sulphate of morphine, in small doses, did much to soothe and mitigate her distress during the progress of the disease.

L. I. Marvin.

Northville, N. Y., 5th Feb., 1839.

P. S.—Our distinguished professor of Surgery, Dr. March, of Albany, performed the operation of lithotomy successfully on a little boy, 12 years of age, in this village, the past season. The stone weighed five drachms.

L. I. M.

CASE OF EXTIRPATION OF THE PAROTID GLAND.

We are happy to state that this operation was successfully performed on the 19th of December, by Dr. J. Randolph, in the presence of Drs. Coates, Harris, Norris, J. Rhea Barton, W. E. Horner, and a large audience of physicians and students of medicine. A friend who was present has been so kind as to furnish us with the following account of the case.

Dr. Randolph premised the operation by remarking, that the disease had existed for a year, and that the parotid gland was probably the organ affected, though this point could only be satisfactorily ascertained after the removal of the diseased mass. He stated that the tumor was in a state of rapid increase, which would augment the difficulties of the operation. With regard to the question, as to whether the parotid gland had ever been removed successfully, he gave as his opinion that it was an operation which had been frequently performed, not only in Europe, but in this country, and proceeded to mention the names of a number of surgeons who had reported cases. He stated that for a long time he had thought that a scirrhous, or indurated parotid gland, could be more readily removed than when in a healthy state, and mentioned that Dr. N. R. Smith coincided with him in this opinion.

In performing the operation, as the left parotid was the one affected, the head was inclined to the right side, and an incision made from the zygoma down to the edge of the sterno-cleido mastoid muscle, a second one at right angles to this, and the flaps dissected up. The facial artery was then secured, and an attempt was made to raise the lower edge of the tumor and secure the external carotid where it enters the gland; this was found, however, to be attended with so much difficulty, in consequence of the close adhesions, that it was determined to dissect it from its attachments from above downwards; in doing this it became necessary to secure the temporal and internal maxillary arteries, besides several others of smaller size; the carotid was cut in dividing the last adhesions of the tumor, and instantly secured by means of Dr. Physick's needle and forceps. The external jugular vein was cut and secured at each end. The periosteum covering the angle of the jaw was absorbed, and the adhesion to the masseter muscle was so strong that part of it was removed with the tumor.

The operation lasted 59 minutes; but little blood was lost, and the patient bore it remarkably well.

After a careful examination of the parts, Dr. Randolph stated to the class that it was the unanimous opinion of the surgeons and anatomists present, that the *parotid gland was completely extirpated.* The ligatures have all, except one on a small vessel, come away; the cavity is filled with healthy granulations, and the patient's general symptoms are perfectly favorable.—Jan. 15, 1839.—*Am. Jour. of Med. Sciences.*

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, FEBRUARY 20, 1839.

OUTLINES OF THE INSTITUTES OF MEDICINE.

Reference was made, last week, to the publication of this beautiful, and, we believe, very valuable and learned production, by Dr. Gallup, late President of the Medical Society of Vermont. The author has founded his remarks on the broad basis of the philosophy of the human economy,

in health and disease, and discussed each subject recognized in the field of observation, with that logical exactness and freedom which characterize the researches of an original thinker. It is a book that is not destined to be thrown upon the shelf after the title page has been read, to repose under the accumulating dust of the age. Its high claims to consideration must be admitted at the outset, and the principles developed and the philosophy which it inculcates will exercise the minds of professional men, we apprehend, more than any native system of theoretical or practical medicine which has appeared in this country. It is to be hoped there will be no sectional feelings operating against its intrinsic merits. Let it be read with candor, and justly weighed in the balance. It is possible that some may cavil at the style, or complain of the mechanism of expression, as being hard English. There is a singularity in the structure of the sentences, which are recognized as being peculiar—and yet, on a careful analysis, the elegance and not the deformity of language constitutes their deviation from common every-day writings. In the next place, the author recollected, at the commencement, that "order is Heaven's first law." He is as methodical in the arrangement of his various topics, as the veriest stickler for natural divisions and sub-divisions could desire, and every line carries with it the evidence of profound investigation. This is but the beginning of our notices of this very acceptable and meritorious performance.

Removal of the Jaw.—Dr. Gage, of New York, on reading the account of Dr. Baxley's operation, at Baltimore, represented to have been without a parallel in the annals of American surgery, addressed the following communication to the Commercial Advertiser, which we have copied in detail, with a view to stating the final issue of the case to which Dr. Gage has called the public attention.

"*New York, January* 25, 1839.

"I noticed in your valuable paper of this day, an article, copied from the Baltimore American, respecting the removal of one half the lower jaw on account of an osteo-sarcomatous tumor, and likewise a statement from Cooper's Surgical Dictionary, that this operation had not been performed in Europe or America, except by the distinguished Dr. Mott, of New York, and Dr. Cusack, of Dublin. That credit may be given where it is due, I would beg to state, that the same operation, and for the same disease, was performed in the presence of the medical class in the Berkshire Medical Institution, I think in October of the year 1826, by J. P. Bacheldor, Professor of Surgery in that institution, assisted by Drs. J. V. C. Smith and H. H. Childs. The operation was completely successful, and the patient was seen by me walking about the streets on the fourteenth day after it. He was a farmer, about forty-five years of age, and the tumor had been two years in forming. In this case the operation was commenced in a manner somewhat different from that in Dr. Baxley's case. One of the lower incisor teeth was first removed, the external carotid artery of the right side was then laid bare and tied; then an incision was made on the mesial line of the lower jaw, commencing opposite the alveolar process, so as not to divide the lip, and continued down to the lower edge of the jaw. Another incision was then made, in a direction somewhat curved downward from the condyloid process of the jaw, in front of the ear, and continued to the first incision on the chin. The operation was completed by

dissecting out the right half of the jaw, as in Dr. Baxley's case. The tumor completely surrounded the jaw, and was about two and a half inches in length and nearly the same in diameter. The last time I saw the patient, which was on the fourteenth day after the operation, I think, the wound was perfectly healed, and the countenance was but slightly disfigured. He appeared to masticate very conveniently, and gave us students a specimen of his powers in that way upon a hard Boston cracker.

Very respectfully, your obedient servant,

THOMAS E. GAGE, M.D., 3 Park Place."

After the patient on whom Dr. Bacheldor operated, had been home some months, the disease was again manifested, and in a more formidable manner than before. In the operation, a portion only of the under jaw was removed, between the chin and angle; but an enlargement of the bone, towards the angle, was soon after discovered, which grew so exceedingly fast that it greatly alarmed the unfortunate patient. Being a man of firmness, he submitted to a second trial of skill. We were present, and have a distinct recollection of all the circumstances. In the presence of a large number of persons, on a beautifully pleasant morning, under the shade of a wide-spreading tree, in the town of Greenfield, Mass., Dr. B. made a new incision, and a fearful wound it was. The jaw was detached from its muscular attachments, unlocked at the joint, and the whole of one half taken away. This was fairly circumscribing the malady, and the poor sufferer speedily recovered. Notwithstanding the loss of half his jaw, there was not a very striking deformity, nor was the power of manducation essentially impaired.

Death of a Child from Laudanum.—From the coroner's report, February 7th, at New York, we learn that the death of Sarah Lecount, aged three months, was produced thus: The mother had been in the habit, nightly, of giving to the deceased infant and her twin sister, a teaspoonful of paregoric each, to prevent them from disturbing her in the night, "*as they were very fretful.*" Having given a dose to one, and none being left for the other, the undutiful mother sent her son to an apothecary's for a fresh supply. When it came, she gave the usual dose, but the child appearing strangely, and having spasms, she examined the article and found she had given laudanum instead of paregoric. Away went the father to the clerk of the apothecary, who gave him five grains of the tartrate of antimony, which he was directed to dissolve in warm water and give the child a teaspoonful every *minute*. But the poor sufferer only grew worse. The father again went to the shop, and the clerk gave him a "*quantity of tartrate of antimony and sulphate of zinc together*," supposed to be in the proportion of about two grains of the tartrate to one of zinc, to be given like the former doses. Dr. Knight was then sent for. Next morning the child died. Now it is a question which of the articles killed the child—either one of them being sufficiently potent to have done it. The mother should have been held accountable to the law for such a violation of her maternal duties. And so should any woman, who, either in the character of a nurse, or the more tender and responsible relationship of mother, endangers the health of body and mind in a child by the administration of any preparation of opium. It is deeply to be deplored that there is not a heavy penalty imposed upon apothecaries who presume

to sell that powerful drug to persons in any condition of life, without a prescription from a regular medical practitioner.

Condition of the Insane Poor.—An effort is making in Pennsylvania, to devise suitable provision for that neglected class of human beings, the insane poor, in that great and enterprising State. Dr. Dunglison was chairman of a committee which has sent forth an appeal to the people. The document is presumed to have been written by the chairman, which does honor to his heart. It carries in it a powerful and irresistibly convincing testimony, that something should be done immediately. Are arguments necessary to hasten a work of benevolence? If some general plan is not soon adopted for the comfortable accommodation of the insane poor of Pennsylvania, we shall at once conclude that the present generation has not kept pace with the progress of humanity in the more frigid regions of the north.

Worcester Insane Hospital.—From the Hon. H. Mann, one of the trustees, we acknowledge the receipt of a copy of the sixth annual report of that excellent institution, the Worcester Insane Hospital. Dr. Woodward's observations are entitled to a very careful perusal. There is a completeness and finish to all his medico-legal reports, which are scarcely ever found in documents emanating from such establishments in Europe.

Geneva Medical College.—The annual commencement was held on the 22d ult. Dr. Hale, president of the institution, gave an excellent address. A gold medal was awarded to A. L. Saunders for the best thesis on the *influence of the mind on the body.* Dr. C. B. Coventry, dean of the faculty, delivered a parting charge to the graduates, on professional duties. Dr. Elisha Doubleday, of Yates Co., N. Y.; Dr. J. C. Beales, of New York, and Dr. William C. Chase, of Upper Canada, received honorary degrees of medicine.

Smallpox.—Such is the neglect of the public authorities in the city of Buffalo, New York, with regard to vaccination, that it is said the smallpox extensively prevails there. Nearly every death, by that awful scourge, is through the neglect of those who have charge of the public health. Birds that will not sing, says the proverb, must be made to sing: and people that will not be vaccinated, voluntarily, must be compelled to submit to that simple, life-preserving process.

Progress of Phrenology.—No. 5 of the new Philadelphia Journal has been promptly delivered. It is really an excellent publication, with which we could not well dispense. It keeps constantly improving in the character of its materials—a property not always characteristic of all the periodicals abroad. Mr. Combe's paper on the size of Sir Walter Scott's brain, is from high authority. Mr. O. S. Fowler, a well-known operative phrenologist, has an article on *monomania.* There is no man living, we apprehend, who can more accurately display the whole intellectual condition of an individual's head—feelings, propensities, good, bad or indifferent—than that gentleman. Success to the American Phrenological Journal.

REGISTER OF THE WEATHER,

Kept at the State Lunatic Hospital, Worcester, Ms. Lat. 42° 15′ 49″. Elevation 483 ft.

1839. January.	THERM. 7, A.M.	THERM. 1, P.M.*	THERM. 9, P.M.	BAROMETER. 7 A.M.	BAROMETER. 1, P.M.*	BAROMETER. 9, P.M.	Wind, 9, P.M.	Weather, 9, P.M.	Remarks.
1 Tues.									
2 Wed.									
3 Thur.			39		29.00	29.83	N	Cloudy	
4 Frid.	39	37	34	29.73	29.67	29.67	N E	Stormy	Four inches of snow fell.
5 Satur.	27	34	31	29.70	29.83	29.73	N W	Clear	Afternoon, very pleasant.
6 Sun.*	24	34	32	29.80	29.83	29.82	N W	Clear	Evening, hazy.
7 Mon.	27	33	36	29.56	29.31	29.30	S W	Cloudy	Evening, hard rain.
8 Tues.	37	36	32	28.97	29.22	29.33	N W	Variable	
9 Wed.	18	30	32	29.65	29.65	29.70	N W	Clear	Weather variable, thaw.
10 Thur.	35	42	41	29.45	29.36	29.33	S	Clear	Afternoon, very pleasant.
11 Frid.	38	49	47	29.39	29.56	29.49	S W	Clear	Very pleasant day.
12 Satur.	40	47	40	29.31	29.18	29.16	S W	Clear	Afternoon, very pleasant.
13 Sun.	37	38	38	29.59	29.60	29.59	N W	Clear	Evening, cloudy.
14 Mon.	39	32	27	29.40	29.44	29.44	N W	Cloudy	Evening, brilliant aurora borealis.
15 Tues.	13	20	19	29.50	29.47	29.45	N	Hazy	Evening, dark cloud in S.; otherwise
16 Wed.	14	30	32	29.41	29.45	29.45	N	Clear	Very pleasant day. [clear.
17 Thur.	22	30	30	29.54	29.61	29.62	E	Clear	Evening, dark cloud in S.; otherwise
18 Frid.	32	43	42	29.55	29.51	29.51	S	Clear	Very pleasant day. [clear.
19 Satur.	32	41	33	29.34	29.15	29 12	W	Clear	Evening, weather changed, very cold.
20 Sun.	4	17	22	29.35	29.36	29.30	W	Hazy	Sun set in a cloud.
21 Mon.	22	28	26	29.14	29.11	29.12	N W	Cloudy	Squally, rather than stormy.
22 Tues.	5	18	17	29.17	29.08	29.06	S W	Cloudy	Evening, 2 inches of snow had fallen.
23 Wed.	26	13	2	29.70	29.89	29.96	N W	Snow squalls	Even. very cold, Therm. 7° below 0.
24 Thur.	−2	19	11	29.49	29.49	29.50	N W	Hazy	Evening, very pleasant.
25 Frid.	13	34	27	29.52	29.60	29.59	S	Hazy	
26 Satur.	44	50	46	29.27	29.09	29.03	S E	Great rain	Thaw, high wind, Bar. fell to 28.96.
27 Sun.	31	28	26	29.50	29.67	29.72	S	Flying clouds	
28 Mon.	9	29	16	29.64	29.60	29.64	N W	Cloudy	Even. high wind, severe snow squall.
29 Tues.	17	28	26	29.80	29.90	29.96	N W	Clear	Pleasant day.
30 Wed.	29	39	37	29.10	29.10	29.13	W	Light snow	
31 Thur.	16	27	29	29.39	29.39	29.44	N W	Clear	Brilliant halo around the moon.

The month has been pleasant, mild and favorable. The extremes of temperature have been 5° below zero, and 50° above. Extremes of barometer have been 29.96, and 28.96. Little snow has fallen. One severe rain, attended by high wind; did little damage in this vicinity, but much in Philadelphia, New York, and to bridges and buildings in every direction.

* *On the Sabbath the observations are at* 1 *o'clock, instead of* 2 *o'clock.*

Medical Miscellany.—Drs. Cutler and Dix, of Boston, have sailed for Europe.—A hog was slaughtered near Raleigh, a short time since, which had two hearts.—Dr. Miller, of Providence, R. I., assisted by medical gentlemen of that city, has successfully performed a very critical operation on a young man, in taking a large tumor from the perineum. On Monday, February 11th, Dr. Miller performed two interesting operations. One was for stone, at North Brookfield, Ms., and the other for a diseased testis, at West Brookfield.—A young physician may hear of a good opening, by applying soon to Dr. B. Haskell, South Boston.—In a neighboring town, a week or two since, the breech-pin of a gun was forced, by an explosion and bursting of the barrel, into the orbit of a man's eye, destroying the organ, and finally lodged under the nose over the bones of the palate, from whence it has been finally extracted.—No. 21 of the second volume of the American Medical Library, exhibits the same care and nice discrimination in the choice of works for republication, which distinguished the work in the first volume. Dr. Bell's Journal, published in the same city, is no less acceptable to the reader, and equally deserving of extensive patronage.—If any of our subscribers are acquainted with the Danish language, it will greatly oblige us to have a translation of various recent publications on medicine and surgery, just received from Copenhagen. To us the contents are a sealed book.—Scarlet fever is represented to be very fatal in Romney county, Va.—The medical lectures have closed for the season, at the Mason-street College, in Boston. Eleven young gentlemen were admitted to the degree of M.D.

Whole number of deaths in Boston for the week ending February 16, 36. Males, 12—females, 24.

Of consumption, 4—marasmus, 2—infantile, 3—scald, 1—scarlet fever, 6—lung fever, 3—dropsy on the brain, 1—disease of the heart, 2—rheumatism, 1—palsy, 1—intemperance, 1—inflammation of the lungs, 1—decline, 1—croup, 2—cancer, 1—dropsy, 1—stillborn, 2.

AUBURN MEDICAL SCHOOL.

Drs. F. H. Hamilton and Owen Munson, being associated in the practice of medicine and surgery, will commence their course of private instruction on the 1st of March, 1839.

A series of lectures on Surgery and Surgical Anatomy, will be given by Dr. Hamilton, continuing six months from the first of March; two lectures per week. All the principal operations in surgery will be performed in the presence of the class.

The students will also be daily instructed and examined in the other branches of medical science.

Terms—$24 per year; payable half yearly, in advance. Feb. 20—tM1

VERMONT MEDICAL COLLEGE.

The annual course of Lectures, at this institution, will commence on the second Thursday of March next, and continue thirteen weeks.

Theory and Practice of Medicine and Obstetrics, by	H. H. Childs, M.D.
General and Special Anatomy and Physiology, by	Robert Watts, Jr., M.D.
Principles and Practice of Surgery, by	Gilman Kimball, M.D.
Chemistry and Materia Medica, by	David Palmer, M.D.
Medical Jurisprudence, by	Norman Williams, A.M.

Fees for the course—$50. Graduation—$18. For those who have attended two courses, but do not graduate—$10. All the above expenses to be paid in advance, or secured by note, with a satisfactory endorser, to David Peirce, Esq., Treasurer of the Institution. Board may always be obtained in the village on reasonable terms. By order of the Board of Trustees, N. WILLIAMS, Secretary.

Woodstock, Vt., Feb. 5, 1839. Feb. 20—3t

PRIVATE MEDICAL INSTRUCTION.

The subscribers are associated for the purpose of giving a complete course of medical instruction. Their pupils will have regular access to the medical and surgical practice of the Massachusetts General Hospital. They will be admitted, also, to the practice of the House of Correction, which constantly presents a large number of important cases, and where opportunities will be afforded for acquiring a practical knowledge of compounding and dispensing medicines. They will be furnished with opportunities for the study of Practical Anatomy, not inferior to any in the country. To the pupils, particularly to those in the last year of their professional studies, facilities will be afforded for acquiring a personal acquaintance with private medical and obstetric practice. Instruction by examinations or lectures will be given in the different branches of medical studies, during the interval between the public lectures of the University. Books, and a room with fire and lights, will be furnished to the students at the expense of the instructers.

GEORGE C. SHATTUCK,
WALTER CHANNING,
JOHN WARE,
GEORGE W. OTIS, Jr.
WINSLOW LEWIS, Jr.

Oct 31—eptf

ORTHOPEDIC INFIRMARY

FOR THE TREATMENT OF SPINAL DISTORTIONS, CLUB FEET, ETC.

At 65 *Belknap Street, Boston.* Patients from a distance can be accommodated with board in the immediate neighborhood. JOHN B. BROWN, M.D., Surgeon.

We the subscribers approve of Dr. J. B. Brown's plan of an infirmary for the treatment of Spinal Affections, Club Feet, and other Distortions of the human body, and will aid him by our advice whenever called upon.

John C. Warren, George Hayward, Edward Reynolds, Jno. Randall, J. Mason Warren, John Jeffries, John Homans, M. S. Perry, W. Channing, George C. Shattuck, J. Bigelow, Enoch Hale, W. Strong, George Parkman, D. Humphreys Storer, George W. Otis, Jr., Winslow Lewis, Jr., J. B. Lane, Edw. Warren, Geo. B. Doane, John Ware, George Bartlett, John Flint.

Boston, August 1, 1838. tf.

BROWN'S PATENT SELF-INJECTING APPARATUS.

The undersigned respectfully calls the attention of medical practitioners to a newly-invented instrument, which is for sale at his store, No. 481 Washington street, corner of Elliot street. If physicians would examine the principles of its construction, they would appreciate its usefulness, and would probably be induced to recommend it very generally in their practice. Physicians, druggists, and the inhabitants of Boston, are particularly invited to look into the superiority of this article over the inventor's former instrument, as it now has the advantage of Goodyear's new India Rubber, which is allowed by all to be an entirely different article from that formerly manufactured.

Feb. 6—eoply WILLIAM BROWN.

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR., at 194 Washington St., corner of Franklin St., to whom all communications must be addressed, post paid. It is also published in Monthly Parts, with a printed cover. There are two volumes each year. J. V. C. SMITH, M.D., Editor. Price $3,00 a year in advance, $3,50 after three months, or $4,00 if not paid within the year. Two copies to the same address, for $5,00 a year, in advance. Orders from a distance must be accompanied by payment in advance or satisfactory reference. Postage the same as for a newspaper.